06-01-06

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6/0	M/C 480-410-202 PO BOX 5052 TROY, MI 48007 12/2006 EHAILE2 000	00093 500831 106456	584	Wa Textoon	ART OF	addressed to the Ma transmitted to the USI	il Stop ISSUE FEE address PTO (571) 273-2885, on the	is deposited with the United rst class mail in an envelope s above, or being facsimile date indicated below.
1 F	C:1501 1400.0 C:1504 300.0						5-3	(Signature)
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_	10/645,684				Michael L. Oliver		DP-310111	8289
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L	APPLN. TYPE				PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE
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	FR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indica	e address or indication of "F dence address (or Change of 22) attached. tion (or "Fee Address" Indica or more recent) attached. Use	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) TROY, MICHIGAN								
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual — Corporation or other private group entity Government								
4a. The following fee(s) are enclosed: Issue Fee								
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).								
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